	inventor, I hereby declare that:											
	t office address and citizenship are a											
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:  SCORPION TOXINS												
the specification of	f which is attached hereto unless the	followi	ng box is checked	:								
☐ was filed on	as U.S. Application	on No		or PCT International	Application No.	and was						
amended o	n (if applicable).											
	I have reviewed and understand the ferred to above.	contents	of the above iden	tified specification, incl	uding the claims, as amende	d by any						
I acknowledge the	duty to disclose information which	s know	n to me to be mate	rial to patentability as d	efined in 37 CFR § 1.56.							
identified below, b	ign priority benefits under 35 U.S.C PCT International application which y checking the box, any foreign app the application on which priority is Country	lication	for patent or inver	ntor's certificate, or PCI	on(s) for patent or inventor's ited States, listed below and International application ha Priority Claimed (Yes/No	ving a filing						
I hereby claim the	benefit under 35 U.S.C. § 119(e) of	any Uni	ted States Provision	onal Application(s) liste	d below.							
I nereby claim the	U.S. Provisional Application	No.		U.	S. Filing Date							
	60/140.227				06/22/99							
designating the United States appli	benefit under 35 U.S.C. § 120 of any ited States, listed below and, insofar cation or PCT International Applica ormation which is known to me to be prior application and the national	as the stion in the mater or PCT	subject matter of e he manner provid- ial to patentability	ach of the claims of this ed by the first paragraph as defined in 37 CFR § g date of this application	application is not disclosed of 35 U.S.C. § 112, I ackno 1.56 which became availabl	in the prior wledge the e between						
POWER OF ATT business in the Pate	ORNEY: I hereby appoint the follont and Trademark Office connected	wing at	torney(s) and/or a th:	gent(s) the power to pro	secute this application and to	ransact all						
Name: KATH	LEEN W. GEIGER			Registration No.: 35	5,880							
	Y. BEARDELL		•		,293							
Send correspondent telephone calls to:	ce and direct	FIA	Iu Pont de Nemours and Company		Tel. No. (302) 302-992-37	40						
Legal			al - Patents		1` '							
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believed to be true;	at all statements made herein of my and further that these statements we or imprisonment, or both, under Sec lity of the application or any patent	re made tion 100	e with the knowled 11 of Title 18 of th	dge that willful false stat	tements and the like so made	are						
		_	INVENTOR(S)	)								
Full Name	Last Name	_	First Name RAFAEL		Middle Name							
of Inventor	f Inventor HERRMANN Signature (please sign bull parie):		RAFAEL		Date: 1 ( ) /2							
					1 +11+1200	0.0						
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of Inventor LEE Signature (please sign full name)		JIAN-MING		Middle Name INVENTOR(S) DELETE								
	Signature (please sign fun name)	$\leq$			8/22/00	FILING						
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Full Name	me Last Name		First Name		Middle Name							
		JAMES		F. Date: 57/17/2								
of Inventor WONG Signature (please sign full name)				1/67/CC	200							
Residence & City		State or Foreign Country DELAWARE		Country of Oitizenship U.S.A.								
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Additional Inventors are being named on separately numbered sheets attack	]		Additional Inventors are	being named	l on separatel	v numbered	i sheets attache	ď	hereto
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